



Installation /Effective Date: _____

Account #: _____ (Office Use Only)

Referral Name (if applicable) _____ (D/L) _____

Date of Application _____ LCP Cabinet _____ (Office Use Only)

**RESIDENTIAL CUSTOMER SIGN UP FORM** (PLEASE PRINT)

Account Holder's Name _____ Date of Birth _____

Service Address _____ City/State/Zip _____ Highland, IL 62249

Billing Address (if different from above) _____ City/State/Zip _____

Spouse's Name #: _____ Is spouse authorized to make changes to the account? ___ Yes ___ No

Daytime phone #: _____ Alternate phone #: _____ Email Address: _____

☐ **By checking this box** you agree to let HCS enter your email address into their notification database. You may unsubscribe at any time by following the link in the email or going to the City's website at <http://www.highlandil.gov/Subscriber>Rental Property: N ☐ or Y ☐ If Yes, provide landlord's contact information below:

Name: _____ Phone: _____ Fax: _____

Please list below, any person(s) you authorize to inquire and/or make changes to your account:

Name: _____ Name: _____

Name: _____ Name: _____

(Office Use Only: Signed LOA for Phone Porting _____)*

ADDITIONAL SERVICES

____ HCS inside wiring maintenance plan. HCS will maintain my inside home wiring utilized for HCS services for \$2.00 per month.

____ HCS wireless/router/maintenance plan; **\$5.00** per month ____ Customer will use/maintain their own router for wireless Internet service

____ Additional Service Outlet (Jack) Charge \$68.95 per additional outlet *

Do you have a sprinkler/irrigation system Y or N

* Number of jacks needed: ____ Phone ____ Internet ____ RF Video ____ Digital Video

Do you have a basement or crawl space? ____ If you have a basement, is it finished or unfinished? ____

____ Installation Charge \$59.95 ____ Installation Charge (EXISTING) \$28.95 ____ Reconnection Fee \$20.00 ____ Set-up fee \$30.00 for Streamer's Dream*

TELEPHONE**HCS Plans:** ____ Voice Limited \$22.95

____ Voice Unlimited \$29.95 *

Features included in Limited Voice: ____ 3-Way Calling ____ Caller ID (number) ____ Call Forwarding ____ Call Waiting ____ Call Return ____ Voicemail

* Voice Unlimited includes above features AND Caller ID (name) **Please check any features above that you DO NOT want.****Additional Options:** ____ Caller ID w/name \$6.00 (included with Unlimited) ____ Caller ID on Call Waiting \$1.00 ____ Selective Call Rejection \$3.50 per line

____ Remote access to Call Forwarding \$1.00 ____ Call Return \$4.00 ____ Distinctive Ring \$3.00 ____ Anonymous call rejection \$3.50 ____ vfax \$3.00 ____ SimRing \$8.00

____ Unlisted Phone Number \$4.50 per line Directory Listing if different than Account Name: _____

* ____ Check if porting current phone number Number to be ported: _____ Carrier Name _____

Current provider's Account Number _____ and PIN or Security Code _____

TV SERVICE

* Digital packages include 1 HD receiver

____ Basic \$33.99 ____ Expanded Basic \$66.99 ____ Digital Family* \$74.99 ____ Digital Plus* \$80.99

Movie Channels ____ HBO \$18.00 ____ SHOW TIME \$15.00 ____ CINEMAX \$15.00 ____ STARZ/ENCORE \$12.00 ____ SPORTS Channel Pkg. \$6.95PPV: YES ☐ No ☐ PPV Code _________ DVR \$5.00 (WHOLE HOME) # OF **ADDITIONAL** RECEIVERS _____ \$6.95 PER MONTH* (One Basic HD box included in all Digital packages)____ # of Standard TV's (include number of TV's to receive RF channels) ____ ***STREAMERS'S DREAM PKG. \$49.95 (60M/60M w/HCS wireless and Basic Analog video)****INTERNET**

(For wireless; see Additional Services section above)

HCS Plans: ____ ESSENTIAL \$24.95 (20M Down/20M Up)

____ BASIC \$29.95 (40M Down/40M Up) ____ CLASSIC \$39.95 (60M Down/60M Up)

____ PREMIER \$50.95 (80M Down/80M Up)

____ ULTIMATE \$64.95 (100M Down/100M Up)

TERMS AND CONDITIONS

ACKNOWLEDGEMENTS:

I acknowledge that I have been provided a copy of the Highland Communication Services "Terms and Conditions of Use," including the "Acceptable Use Policy." Customer initials _____.

I understand and accept Highland Communication Services "Terms and Conditions of Use," including the "Acceptable Use Policy," as provided and published on http://www.highlandil.gov/Public_Documents/HighlandIL_HCS/Contact_Us/Acc

The undersigned makes application for service, and for such additional service or equipment as may be ordered later, agrees to pay established rates for all such services and equipment. In making this application the undersigned agrees to the tariffs or rates for the service furnished under this application.

I agree to subscribe to the selected services, commencing on the date service is activated. I also understand that if the service is disconnected and reconnected for any reason, reconnect charges may apply. I also understand that Highland Communication Services equipment will be returned immediately upon termination of the service or at any time upon request. Failure to return the main Set-top-box (digital receiver) will result in a one-time charge of \$340.00 and \$200.00 per each additional receiver, and must be returned in good condition. Additionally, wireless routers that are being rented from HCS shall be returned at time of service termination or a one-time charge of \$66.00 will be made to the customer's account. I agree to be bound by Highland Communication Services Terms and Conditions of Use, including the Acceptable Use Policy, as published on http://www.highlandil.gov/Public_Documents/HighlandIL_HCS/Contact_Us/Acc My continued use of the service shall be considered my consent to any amendments that may be made to the Terms and Conditions of Use, including the Acceptable Use Policy.

I agree that I have authorized HCS to enable PPV programming on my Digital service and that I am responsible for all charges. I have provided a code to HCS to be used for access to this programming.

After installation of the equipment from Highland Communication Services, you are responsible for any damage, regardless of cause, to the equipment. Highland Communication Services may interrupt or terminate service if you breach any provision of this agreement (including nonpayment of service), or if you use the service in a manner that adversely affects service to other customers or harasses our customers or employees, or if you or others use your service to engage in fraud or unlawful conduct. It is in the discretion of Highland Communication Services to restore interrupted service following correction of the violation and payment of amounts due, including restoration charge, which may be assessed for restoring your service.

Prices subject to change without notice.

I understand that surge and firewall protection are my responsibility and I agree that I will be responsible for any and all damages or losses.

I understand that the package price listed on this application and in all other Highland Communication Services materials does not include mandatory fees and taxes. I understand that my bill will be larger than the package price due to these charges.

I grant Highland Communication Services authority to change my long distance service.

UNLIMITED LONG DISTANCE: This service is for residential voice usage only. The Unlimited Plan cannot be used for long distance access to the Internet, or for business purposes, telemarketing or autodialing, for connection to the Internet, for other data service (including a significant amount of facsimile transmissions or data usage per month) or for any other use that does not involve a person-to-person conversation or voice message. The Unlimited Plan only applies to the telephone line on which the plan is assigned. Other restrictions may apply. If it is determined that the customer's usage is not within the average usage of the average Highland Communication Services residential voice customers, Highland Communication Services reserves the right to move a customer off this plan to an alternate plan.

Signature of Account holder: _____ Date: _____



FOR OFFICIAL USE ONLY:

Hometown Pride Participant: Y or N (HCS yard sign)

How did you hear about our service: ☐ Radio ☐ Mailing ☐ Internet ☐ News Paper ☐ Other

☐ Referral (Name and Address) _____ HSC Acct. # of Referral _____

Sales Rep: (Sales Rep's Name) _____

☐ Double Play Discount (\$5.00/month credit for 2 services)

☐ Triple Play Discount (\$10.00/month credit for 3 services)